

State of Washington Application for a Water Right Permit

SURFACE WATER ☐ GROUND WATER
☐ Permanent ☐ Temporary ☐ Short Term

| Section 1. APPLICANT | [| | | |
|--|--|--|------------------------------------|--|
| Applicant/Business Name: Wilkins Kaiser & (| Olsen, Inc. | Phone No: 509-427-8 | 8413 | Other No: |
| Address: PO Box 8 | | | | |
| City: Carson | | State: WA | | Zip: 98610 |
| Email Address (optional): | | | | |
| Contact Name (if different from abo Charlie Allen | ove): | Phone No: 509-427-8 | 8413 | Other No: 541-490-2720 |
| Relationship to Applicant: Superintendent | | | | |
| Address: PO Box 8 | | | | |
| Carson | | State: WA | | Zip. 98610 |
| Email Address (optional): callen@saw.net | | | | |
| riefly describe the purpose of your logs | ur proposed project: <u>Draw w</u> storage decks and u | | | |
| riefly describe the purpose of your right our log such anticipated length of time to compare the List all purposes for water Use | ur proposed project: Draw westorage decks and use plete your project: 3 mos. Thich water will be applied to a be a second (CFS) | eneficial use and li | or du | st control. |
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| irrigate our log stanticipated length of time to come water Use List all purposes for water Use Log storage deck irrigation TOTAL: thort Term/Temporary Water I this a request for a short term per this request for a temporary per | ur proposed project: | eneficial use and li Acre-Feet per Year (AF/YR) (If known) 243 af/yr non-recurring)? | st quanti Period (Contir Seas thro | ity required for each of Use nuously or Seasonal) Onal 5/1 ugh Oct 31 |

| Complete A or B, and C below A.) If Surface Water Source | | | | | | B.) If Ground Water Source | | | | | | |
|--|--|--|--|--|---|---|--|--|--|-----------|--|--|
| A.) If Surface Water Source Spring Creek River Lake | | | | | Well(s) Other: | | | | | | | |
| Other: | | | | | | | | | | | | |
| Source Name: Wind River-main stem | | | | | Well diameter & depth: | | | | | | | |
| Tributary to: 3 miles Columbia River | | | | | Number of proposed points of withdrawal: | | | | | | | |
| | | | | | | Do you have an existing well? YES NO | | | | | | |
| Number of proposed diversion points: Do you have an existing diversion? YES NO | | | | | If available, attach Water Well Report and pump te Well Tag ID No | | | | | | | |
| C.) Po | oint of Div | ersion/W | ithd | rawal | – Lega | l Descri | | | | | | |
| | Parcel No. | | 1/4 1/4 Sec | | | n Tow | vnship Range | | County | | | |
| 13 | | | NW | SW | 16 | 3N | | 8E | Skamania | | | |
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Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

| Section 6. DOMESTIC WATER SUP | PLY SYSTEM INFORMATION N/A |
|---|--|
| omplete A or B, and C below | |
| A.) Domestic Water Systems only | B.) Municipal Water Systems only (defined under RCW 90.03.015) |
| Projected number of connections to be served: | Present population to be served water: |
| Type of connections: | Estimate future population to be served:(20 year projection) |
| C.) Water System Planning | |
| Do you have a Water System Plan approved by the Division? YES NO | Washington State Department of Health, Drinking Water |
| - 하시면 이번 하게 되었습니다. 이번 10일 등 1일에 하나 보다 | Water System Number: |
| | |
| Name of water system. | |
| | |
| Are you within the service area of an existing water | system? YES NO |
| Are you within the service area of an existing water | system? YES NO |
| Are you within the service area of an existing water | system? YES NO |
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| Are you within the service area of an existing water of yes, explain why you are unable to connect to the | system? YES NO system: |
| Are you within the service area of an existing water of yes, explain why you are unable to connect to the section 7. IRRIGATION/STOCKWA | system? YES NO system: |
| Are you within the service area of an existing water of yes, explain why you are unable to connect to the Section 7. IRRIGATION/STOCKWA | system? YES NO system: TER/OTHER FARM USES N/A this application = ACRES |
| Name of water system: Are you within the service area of an existing water of yes, explain why you are unable to connect to the section 7. IRRIGATION/STOCKWA rigation Otal number of acres requested to be irrigated under OTE: Outline the area to be irrigated on your attaction. | system? YES NO system: TER/OTHER FARM USES N/A this application = ACRES |
| Are you within the service area of an existing water of yes, explain why you are unable to connect to the section 7. IRRIGATION/STOCKWA rigation otal number of acres requested to be irrigated under OTE: Outline the area to be irrigated on your attacknockwater | system? YES NO system: TER/OTHER FARM USES N/A this application =ACRES ched map. |
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Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

| s the combined acreage under existing rights greater than 6000 acres? YES NO | |
|--|------|
| Do you have a controlling interest in a Family Farm Development Permit? YES NO | |
| f yes, enter Permit No: | |
| Section 8. OTHER WATER USES | |
| Hydropower | |
| indicate total feet of head and proposed capacity in kilowatts: | |
| Describe works: | _ |
| | _ |
| ndicate all uses to which power is to be applied: | |
| FERC License No: | _ |
| Mining/Industrial Use Describe use, method of supplying and utilizing water: <u>Irrigation of log storage deck</u> s | S, |
| dust control. See Section 5 Water System Description | |
| | _ |
| | |
| | _ |
| Section 9. WATER STORAGE | |
| Section 9. WATER STORAGE Will you be using a dam, dike, or other structure to retain or store water? ▼ YES □ NO | |
| | |
| Vill you be using a dam, dike, or other structure to retain or store water? ☑ YES ☐ NO | |
| Will you be using a dam, dike, or other structure to retain or store water? ▼ YES □ NO Are you proposing to store more than 10 acre-feet of water? □ YES ☒ NO | |
| Will you be using a dam, dike, or other structure to retain or store water? ☑ YES ☐ NO Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO Will the water depth be 10 feet or more? ☐ YES ☒ NO | |
| Will you be using a dam, dike, or other structure to retain or store water? ☑ YES ☐ NO Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO Will the water depth be 10 feet or more? ☐ YES ☒ NO | oint |
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| Will you be using a dam, dike, or other structure to retain or store water? YES NO Are you proposing to store more than 10 acre-feet of water? YES NO Will the water depth be 10 feet or more? YES NO f you answered yes to any of the above questions, please describe: OTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest per less than the storage will be above grade, you must also complete an Application for Permit to Construct a leservoir and a Dam Construction Permit and Application. Section 10. DRIVING DIRECTIONS | oint |
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Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

| Print Name (Applicant or authorized representative) | Signature | 3-4-08 Date |
|--|----------------------------------|------------------|
| (Applicant of authorized representative) (SKEISM T. WICKIMS Print Name (Landowner of Place of Use) | Wille T. Wille, Pas Signature | 4-3-2008 Date |
| Print Name (Landowner of Place of Use) | Signature | Date |
| Print Name (Landowner of Place of Use) | Signature | Date |

Submit your application to: DEPARTMENT OF ECOLOGY

CASHIERING SECTION

PO BOX 5128

LACEY WA 98509-5128

Please check the region in which your proposed project is located.

Southwest Northwest Central Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300 Northwest Regional Office: 425-649-7000 Central Regional Office: 509-575-2490 Eastern Regional Office: 509-329-3400